

**-FILED-**

OCT 26 2022

At GARY T. BELL, Clerk  
U.S. DISTRICT COURT  
NORTHERN DISTRICT OF INDIANA

# UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF INDIANA

Use this form to sue for employment discrimination. NEATLY print in ink (or type) your answers.]

DAVID L WASHINGTON

[You are the **PLAINTIFF**, print your full name on this line.]

v.

MAVIS TIRE AND BRAKES

[The **DEFENDANT** is who you are suing.]

Case Number 2:22cv314

[For a new case in this court, leave blank.  
The court will assign a case number.]

[The top of this page is the caption. Everything you file in this case must have the same caption.  
Once you know your case number, it is VERY IMPORTANT that you include it on everything you send  
to the court for this case. DO NOT send more than one copy of anything to the court.]

## EMPLOYMENT DISCRIMINATION COMPLAINT

1. My address is: 5650 CONNECTICUT STREET  
MERRILLVILLE IN 46410
2. My telephone number is: (219 ) 310-0842
3. The Defendant's address is: MAVIS TIRE AND BRAKES C/O JIM GANNON -HR DIRECTOR  
358 SAW MILL RIVER RD, MILLWOOD, NY 10546
4. This action is brought for employment discrimination pursuant to:  
☒ Title VII of the Civil Rights Act of 1964, 42 U.S.C. §§ 2000e to 2000e-17.  
[race, color, gender, religion, national origin]  
☒ Age Discrimination in Employment Act of 1967, 29 U.S.C. §§ 621 to 634.  
☐ Americans with Disabilities Act of 1990, 42 U.S.C. §§ 12112 to 12117.  
☐ Other: \_\_\_\_\_
5. I filed a charge of discrimination with the Equal Employment Opportunity Commission or the  
Indiana Civil Rights Commission on: \_\_\_\_\_
6. The date on my Notice of Right to Sue letter is: \_\_\_\_\_
7. The date I received my Notice of Right to Sue letter was: 10/21/2022

[DO NOT write in the margins or on the back of any pages. Attach additional pages if necessary.]

## CLAIMS and FACTS

DO: Write a short and plain statement using simple English words and sentences.

**DO NOT:** Quote from cases or statutes, use legal terms, or make legal arguments.

DO: Explain when, where, why, and how the defendant discriminated against you.

DO: Include every fact necessary to explain your case and describe your injuries or damages.

DO: Number any documents you attach and refer to them by number in your complaint.

**DO NOT:** Include social security numbers, dates of birth, or the names of minors.

DO: Number your paragraphs. *[The first paragraph has been numbered for you.]*

1. I began my employment with Respondent in or around 2017. My most recent position was  
Regional Training Manager. During my employment, my job performance was scrutinized,  
and I was demoted. Subsequently, in or around May 2021, I was constructively discharged.

2. I believe I have been discriminated against my age, 57 (YOB: 1963), and in retaliation for  
engaging in protected activity, in violation of the Age Discrimination in Employment Act of  
1967, as amended.

3. I believe I was discriminated against because of my race, Black, in violation of Title VII of the  
Civil Rights Act of 1964, as amended.

**RELIEF** – If you win this case, what do you want the court to order the defendant to do?

1.COMPENSATION FOR SALARY, WAGES, BENEFITS, WORK RELATED EXPENSES, AND OTHERS  
FROM TIME OF LOST AND UNTIL PRESENT.

2.COMPENSATION FOR PAIN AND SUFFERING AND EMOTIONAL STRESS.

**DOCUMENTS** – I have attached a copy of the following documents:

☒ Charge Of Discrimination form filed with the Equal Employment Opportunity Commission  
or the Indiana Civil Rights Commission

☒ Notice of Right to Sue letter

☐ Other: \_\_\_\_\_

**FILING FEE** – Are you paying the filing fee?

☒ Yes, I am paying the \$402.00 filing fee. I understand that I am responsible to notify the  
defendant about this case as required by Federal Rule of Civil Procedure 4. *[If you want the  
clerk to sign and seal a summons, you need to prepare the summons and submit it to the clerk.]*

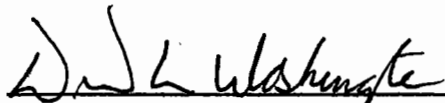
☐ No, I am filing a Motion to Proceed In Forma Pauperis and asking the court to notify the  
defendant about this case.

[Initial Each Statement]

\_\_\_\_\_ I will keep a copy of this complaint for my records.

\_\_\_\_\_ I will promptly notify the court of any change of address.

\_\_\_\_\_ I declare **under penalty of perjury** that the statements in this complaint are true.

  
Signature

10-26-2022  
Date

EEOC Form 5 (11/09)

<b>CHARGE OF DISCRIMINATION</b>  This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s):  <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC <b>440-2021-03957</b>	
<b>ILLINOIS DEPARTMENT OF HUMAN RIGHTS</b> and EEOC <i>State or local Agency, if any</i>			
Name (indicate Mr., Ms., Mrs.) <b>MR. DAVID L WASHINGTON</b>		Home Phone <b>(219) 310-0842</b>	Year of Birth <b>1963</b>
Street Address City, State and ZIP Code <b>5650 CONNECTICUT STREET, MERRILLVILLE, IN 46410</b>			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name <b>MAVIS TIRE AND BRAKES</b>		No. Employees, Members <b>501+</b>	Phone No. <b>(914) 984-2500</b>
Street Address City, State and ZIP Code <b>4453 SOUTHWEST HWY, OAK LAWN, IL 60453</b>			
Name		No. Employees, Members	Phone No.
Street Address City, State and ZIP Code			
DISCRIMINATION BASED ON (Check appropriate box(es).)  <input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input checked="" type="checkbox"/> AGE <input type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest <b>05-01-2021 05-01-2021</b>  <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <b>I began my employment with Respondent in or around 2017. My most recent position was Regional Training Manager. During my employment, my job performance was scrutinized, and I was demoted. Subsequently, in or around May 2021, I was constructively discharged.</b>  <b>I believe I have been discriminated against my age, 57 (YOB: 1963), and in retaliation for engaging in protected activity, in violation of the Age Discrimination in Employment Act of 1967, as amended.</b>  <b>I believe I was discriminated against because of my race, Black, in violation of Title VII of the Civil Rights Act of 1964, as amended.</b>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.  I declare under penalty of perjury that the above is true and correct.		NOTARY - When necessary for State and Local Agency Requirements  I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT   SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	
<b>Digitally signed by David L Washington on 07-22-2021 10:48 PM EDT</b>			



**DISMISSAL AND NOTICE OF RIGHTS**

To: **David L. Washington**  
**5650 Connecticut Street**  
**Merrillville, IN 46410**

From: **Chicago District Office**  
**230 S. Dearborn**  
**Suite 1866**  
**Chicago, IL 60604**

☐

On behalf of person(s) aggrieved whose identity is  
**CONFIDENTIAL (29 CFR §1601.7(a))**

EEOC Charge No.

EEOC Representative

Telephone No.

**440-2021-03957**

**Marina Ravelo,**  
**Investigator**

**(312) 872-9746****THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:**☐

The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.

☐

Your allegations did not involve a disability as defined by the Americans With Disabilities Act.

☐

The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.

☐

Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge

☒

The EEOC issues the following determination: The EEOC will not proceed further with its investigation, and makes no determination about whether further investigation would establish violations of the statute. This does not mean the claims have no merit. This determination does not certify that the respondent is in compliance with the statutes. The EEOC makes no finding as to the merits of any other issues that might be construed as having been raised by this charge.

☐

The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.

☐

Other (briefly state)

**- NOTICE OF SUIT RIGHTS -**

(See the additional information attached to this form.)

**Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act:** This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

**Equal Pay Act (EPA):** EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission

Julianne Bowman/np

7/27/2021

Enclosures(s)

**Julianne Bowman,**  
**District Director**

(Date Issued)

cc:

**MAVIS TIRE AND BRAKES**  
**c/o Jim Gannon-HR Director**  
**358 Saw Mill River Rd**  
**Millwood, NY 10546**